



**REQUEST  
For  
CONTINUED EXAMINATION (RCE)  
TRANSMITTAL**

*Submit an original and a duplicate for fee processing*

Application Number	09/633,882
Filing Date	8/5/1999
First Named Inventor	Mikkel Thorup
Examiner Name	Benjamin R. Bruckart
Group/Art Unit	2155
Attorney Docket ID	Thorup 1999-0467A
Express Mail Label no.	

**This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application.**

**1. Submission required under 37 CFR 1.114**

**a. Previously submitted**

- i. ☒ Consider the amendment(s)/reply(ies) under 37 CFR 1.116 previously filed on **December 29, 2004**
- ii. ☐ Consider the arguments in the Appeal Brief or Reply Brief previously filed on
- iii. ☐ Other

**b. Enclosed**

- i. ☐ Amendment/Reply
- ii. ☐ Affidavit(s)/Declaration(s)
- iii. ☐ Information Disclosure Statement (IDS)
- iv. ☐ Other

**2. Miscellaneous**

- a. ☐ Suspension of action on the above-identified application is requested under 37 CFR 1.103(c) for a period of months.
- b. ☐ Other

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03 FC:1202

400.00 OP

**3. Fees**

- a. ☒ The Director is hereby authorized to charge the following fees, or credit any overpayments, to Deposit Account No. **500732 of Henry T. Brendzel**, should a check not be enclosed, or be enclosed but for an incorrect amount.

- |  |        |
|--|--------|
| i. <input checked="" type="checkbox"/> RCE fee Required under 37 CFR 1.17(e) | \$ 790 |
| iii. <input checked="" type="checkbox"/> Extra Claims fee                    | \$ 400 |
| ii. <input type="checkbox"/> Extension of Time fee                           | \$     |
| iv. <input type="checkbox"/> Other   | \$     |

- b. ☒ Enclosed check in the amount of **\$ 1390**

- c. ☐ Payment by credit card (Form PTO-2038 enclosed)

- 4. ☒ Please Carry over the prior application's correspondence address.
- 5. ☒ Postcard(s)
- 6. ☐ Other :

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm or Individual Name	<b>Henry T. Brendzel</b>	
Signature		Date <b>12/9/05</b>

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail service in an envelop addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA22313-1450 on this date **12/9/05**

		<b>12/9/05</b>
Name of Person Signing	Signature	Date

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